0001450156

Expires:

OMB Number

Estimated average burden

hours per response

OMB APPROVAL

3235-0076

4.00

March 15, 2008

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEG Mail Processing Section

MAR 122009

TEMPORARY FORM D

Washington, DC

าเดบ

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate c Limited Partnership Interests of Highbridge Convertible Opportunities Fundament						
Filing Under (Check box(es) that apply): ☐Rule 504 ☐Rule 505 ☐R Type of Filing: ☐New Filing ☐Amendment	tule 506 Section 4(6) ULOE					
A. BASIC IDENTIFICATION D	ATA PROCESSED					
1. Enter the information requested about the issuer	0 t t to					
Name of Issuer (check if this is an amendment and name has changed, and indicate char Highbridge Convertible Opportunities Fund, L.P.	ALTO ALIBEITEDS					
Address of Executive Offices (Number and Street, City, State, Zip C 9 West 57 th Street, 27 th Floor, New York, New York, 10019	Code) Telephone Number (Including Area-Gode) (212) 287-4900					
Address of Principal Business Operations (Number and Street, City, State, Zip C (if different from Executive Offices)	Code) Telephone Number (Including Area Code)					
Brief Description of Business Private Investment Fund						
Type of Business Organization □ corporation □ business trust □ limited partnership, already formed □ other (pleas	e specify):					
Month Year Actual or Estimated Date of Incorporation or Organization: 09 08	Actual Estimated 09036347					
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE CN for Canada; FN for other foreign jurisdiction)						

GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239,500) and otherwise comply with all the requirements of § 230,503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (9-08)

1 of 8

 Each beneficial owner having issuer; 	g the power to vote or dispose	e, or direct the vote or disp	osition of, 10%	or more of a class of equity securities of the
 Each executive officer and d 	irector of corporate issuers an	d of corporate general and	managing partn	ers of partnership issuers; and
 Each general and managing p 	partner of partnership issuers.			
Check Box(es) that Apply: Prom	oter Beneficial Owner	Executive Officer	Director	⊠General and/or Managing Partner
Full Name (Last name first, if individu	ual)			
Highbridge GP, LLC (the "Gene	•			
Business or Residence Address (Numl	per and Street, City, State, Zip	Code)		
9 West 57th Street, 27th Floor, N	New York, New York, 100	019		
Check Box(es) that Apply: Prom	oter Beneficial Owner	Executive Officer	⊠Director*	General and/or Managing Partner
Full Name (Last name first, if individu	ıal)			
Crawshaw, Richard				
Business or Residence Address (Numb	ber and Street, City, State, Zip	Code)		
P.O. Box 10763, Grand Cayman	KY1-1007, Cayman Isla	nds, British West Indi	es	
Check Box(es) that Apply: Prom	oter Beneficial Owner	Executive Officer	⊠Director*	☐General and/or Managing Partner
Full Name (Last name first, if individu	ıal)			
Harris, Clive				
Business or Residence Address (Numl	ber and Street, City, State, Zip	Code)		
Box 30142 SMB Grand Cayman	, Cayman Islands, Britis	h West Indies		
Check Box(es) that Apply: Prom *Trading Manager of the Issuer (the		Executive Officer	Director	⊠General and/or Managing Partner*
Full Name (Last name first, if individu	ial)			- ""
Highbridge Capital Managemen	t, LLC			
Business or Residence Address (Numl 9 West 57 th Street, 27 th Floor, New Y	-	Code)		
Check Box(es) that Apply: Prom *Chief Compliance Officer of the To		⊠Executive Officer*	Director	General and/or Managing Partner
Full Name (Last name first, if individu Oliva, John	ual)			
Business or Residence Address (Numb 9 West 57 th Street, 27 th Floor, Ne				
Check Box(es) that Apply: Prom	oter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individu	nal)			
Business or Residence Address (Numb	per and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	oter Beneficial Owner	Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, if individu	ial)		•	
Business or Residence Address (Numb	per and Street, City, State, Zip	Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA

Each promoter of the issuer, if the issuer has been organized within the past five years;

2. Enter the information requested for the following:

<u> </u>					3. INFOR	MATION	ABOUT	OFFERI	NG					
1. Has the issu	er sold, or	does the is	suer inten	d to sell, to	non-accre	dited inve	stors in thi	s offering	?				Yes	No ⊠
			Answe	r also in A	appendix, (Column 2,	if filing u	nder ULOI	Ε.					
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?									\$ <u>1,000,0</u>	00*				
*the Administrator in its discretion may accept lower amounts														
3. Does the of	fering pern	nit joint ow	nership of	a single u	nit?					******		••••••	Yes ⊠	No □
person or a	on for solic gent of a b i) persons t	itation of proker or de	ourchasers ealer regist	in connec	tion with s the SEC a	sales of se nd/or with	curities in a state or	the offering states, list	ng. If a pe t the name	erson to be of the bro	e listed is a oker or dea	on or similar an associated aler. If more hat broker or		
Full Name (Last	name first,	if individu	ıal)											
Business or Resi 270 Park Ave		,		-	State, Zip	Code)								
Name of Associa														-
States in Which			licited or I	ntends to S	Solicit Purc	hasers								
													(X) A1	1 States
														· Cuito
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last	name first,	if individu	ıal)											
Business or Resi	dence Add	ress (Num	ber and Str	eet, City,	State, Zip (Code)								
Name of Associa	ated Broker	or Dealer	<u></u>						•••	,				
States in Which	Person List	ed Has So	licited or I	ntends to S	Solicit Purc	hasers	· * du 1							
(Check "Al	l States" or	check indi	ividual Sta	tes)										I States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last	name first,	if individu	ıal)		-									
Business or Resi	dence Add	ress (Numl	ber and Str	eet, City,	State, Zip (Code)		<u>.</u>						
Name of Associa	nted Broker	or Dealer												
States in Which	Person List	ed Has Sol	licited or I	ntends to S	Solicit Purc	hasers								
(Check "Al	I States" or	check indi	vidual Sta	tes)	•••••						•••••			States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
		(Use t	lank sheet	, or copy a	and use add	litional co	pies of this	sheet, as	necessary.)				
<u>, , , , , , , , , , , , , , , , , , , </u>		OFFER	ING PRI	CE, NUI	MBER O	F INVES	TORS.	EXPENS	ES AND	USE OF	PROCE	EEDS		

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE	S AND USE OF PROCEE	DS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \sum and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	
	Equity	\$	\$
,	□Common □Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$94,450,000
	Other (Specify)		\$
	Total		\$94,450,000
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	* <u>> 1,100,000</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	72	\$ <u>94,450,000</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		¢
	Rule 504		\$ \$
	Total		\$ \$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.		<u> </u>
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	[\$
	Legal Fees	🗵	\$80,000
	Accounting Fees	🗵	\$ <u>20,000</u>
		[\$
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		\$
			\$

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proproposed to be used for each of the purposes show purpose is not known, furnish an estimate and check estimate. The total of the payments listed must proceeds to the issuer set forth in response to Part C -				
		Ófi Direc	nents to ficers, ctors, & filiates	Payments to Others	
	Salaries and fees	□ \$		□ \$	
	Purchase of real estate	\$	<u></u> _	S	
	Purchase, rental or leasing and installation of machine	ery and equipment	□ \$		\$
	Construction or leasing of plant buildings and facilities	es	□ \$		S
	Acquisition of other businesses (including the valinvolved in this offering that may be used in exchan of securities of another issuer pursuant to a merger)	\$	······································	□ \$	
	Repayment of indebtedness	\$		□ \$	
	Working capital	••••••	□ \$		□ \$
	Other (specify): Investment Capital		∑ \$ <u>9,999,</u>	900,000	S
	Column Totals Total Payments Listed (column totals added)	⊠ \$ <u>9,999,9</u>	900,000 \$9,999		
	D. FED	DERAL SIGNATURE			
follow	suer has duly caused this notice to be signed by the uning signature constitutes an undertaking by the issuer tof its staff, the information furnished by the issuer to a	to furnish to the U.S. See	curities and E	Exchange Con	nmission, upon written
	(Print or Type) ridge Convertible Opportunities Fund, L.P.	Signature	Date 3/10/09		
Name (John (of Signer (Print or Type) Oliva	Title of Signer (Print or Chief Compliance Off the Trading Manager	icer of Hight		l Management, LLC,

END